



## **Application Data Sheet**

### **Application Information**

Application number:: 10/748,765  
Filing Date:: 12/29/03  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R???:  
Number of CD disks:: 1  
Number of copies of CDs:: 1  
Sequence Submission:: Yes  
Computer Readable Form (CRF)?::  
Number of copies of CRF::  
Title:: Methods of Treating and/or Preventing  
Autoimmune Diseases  
Attorney Docket Number:: 019856-000210US  
Request for Early Publication:: No  
Request for Non-Publication:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 2  
Small Entity?:: No  
Latin name::  
Variety denomination name::  
Petition included?:: No  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers One::  
Secrecy Order in Parent Appl.:: No

### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Israel  
Status:: Full Capacity  
Given Name:: Illana  
Middle Name::  
Family Name:: Gozes  
Name Suffix::  
City of Residence:: **Ramat-Hasharon**  
State or Province of Residence::  
Country of Residence:: Israel  
Street of Mailing Address:: **14 Ha'amal Street**  
City of Mailing Address:: Ramat-Hasharon  
State or Province of mailing address::  
Country of mailing address:: Israel  
Postal or Zip Code of mailing address:: **47445**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Israel  
Status:: Full Capacity  
Given Name:: Daniel  
Middle Name::  
Family Name:: Offen  
Name Suffix::  
City of Residence:: Kfar Haroeh  
State or Province of Residence::  
Country of Residence:: Israel  
Street of Mailing Address::  
City of Mailing Address:: Kfar Haroeh  
State or Province of mailing address::

Country of mailing address:: Israel  
Postal or Zip Code of mailing address:: 38955

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Israel  
Status:: Full Capacity  
Given Name:: Eliezer  
Middle Name::  
Family Name:: Giladi  
Name Suffix::  
City of Residence:: Netania  
State or Province of Residence::  
Country of Residence:: Israel  
Street of Mailing Address:: 40 Sachlav Street  
Postal Address Line Two:: Ramat Poleg  
City of Mailing Address:: Netania  
State or Province of mailing address::  
Country of mailing address:: Israel  
Postal or Zip Code of mailing address:: 42207

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Israel  
Status:: Full Capacity  
Given Name:: Eldad  
Middle Name::  
Family Name:: Melamed  
Name Suffix::  
City of Residence:: Tel-Aviv  
State or Province of Residence::  
Country of Residence:: Israel  
Street of Mailing Address:: **Tagor Street 44**

City of Mailing Address:: Tel-Aviv  
State or Province of mailing address::  
Country of mailing address:: Israel  
Postal or Zip Code of mailing address:: 69341

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Douglas  
Middle Name::  
Family Name:: Brenneman  
Name Suffix::

City of Residence:: North Wales  
State or Province of Residence:: PA  
Country of Residence:: US  
Street of Mailing Address:: 121 Kingston Way  
City of Mailing Address:: North Wales  
State or Province of mailing address:: PA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 19454-4529

### **Correspondence Information**

Correspondence Customer Number:: 20350

### **Representative Information**

Representative Customer Number:: 20350

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An Appn claiming	60/437,650	01/02/03

benefit under 35 USC  
119(e) of

**Foreign Priority Information**

Country::

Application number::

Filing Date::

**Assignee Information**

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::